

# CR-102 (June 2004)

PROPOSED RULE WAKI	(Implements RCW 34.05.320) Do NOT use for expedited rule making	
Agency: Department of Social and Health Services, Aging an		
<ul> <li>✓ Preproposal Statement of Inquiry was filed as WSR <u>06-18-08</u></li> <li>✓ Expedited Rule MakingProposed notice was filed as WSR <u>Proposal is exempt under RCW 34.05.310(4).</u></li> <li>✓ Title of rule and other identifying information: (Describe Subject In this proposal, the department is:</li> </ul>	; or Supplemental Notice to WSR Continuance of WSR	
<ul> <li>Amending WAC 388-112-0250, What is Cardiopulmon</li> <li>Amending WAC 388-112-0270, Who must take residential to the section of the</li></ul>	ential care administrator training and when? al Long-Term Care Services, related to requirements for	
Hearing location(s):	Submit written comments to:	
Blake Office Park East – Rose Room 4500 – 10 <sup>th</sup> Ave. SE Lacey, Washington 98503 (One block north of the intersection of Pacific Ave. SE and Alhadeff Lane, behind Goodyear Tire. A map or directions are available at <a href="http://www1.dshs.wa.gov/msa/rpau/docket.html">http://www1.dshs.wa.gov/msa/rpau/docket.html</a> or by calling 360-664-6097)	Name: DSHS Rules Coordinator Address: PO Box 45850, Olympia WA, Olympia, WA 98504 Delivery: 4500 – 10 <sup>th</sup> Ave. SE, Lacey, Washington 98503 E-mail: fernaax@dshs.wa.gov Fax: (360) 664-6185 by 5:00 p.m. on December 5, 2006	
Date: December 5, 2006 Time: 10:00 a.m.	Assistance for persons with disabilities: Contact Stephanie Schiller, DSHS Rules Consultant by December 1, 2006	
Date of intended adoption: Not earlier than December 6, 2006 (Note: This is <b>NOT</b> the <b>effective</b> date)	TTY (360) 664-6178 or (360) 664-6097 or by e-mail at <u>schilse@dshs.wa.gov</u>	
is to add this requirement. The purpose for new language	hat all prospective adult family home providers take the ed. The purpose of the new language in WAC 388-112-0270 in WAC 388-112-0250 is to clarify that CPR training must in Chapter 388-112 WAC is to add content requirements for	
Statutory authority for adoption: RCW 74.08.090; RCW 18.20.090; RCW 70.128.040; Chapter 70.128 RCW	Statute being implemented: RCW 74.08.090; RCW 18.20.090; RCW 70.128.040; Chapter 70.128 RCW as amended by Chapter 249, Laws of 2006	
Is rule necessary because of a:     ☐ Yes     ☐ No       Federal Law?     ☐ Yes     ☐ No       Federal Court Decision?     ☐ Yes     ☐ No       State Court Decision?     ☐ Yes     ☐ No       If yes, CITATION:	CODE REVISER'S OFFICE	
10/26/06	STATE OF WASHINGTON FILED	
NAME (type or print) Andy Fernando SIGNATURE	OCT 3   2006	
Howy tens	WSR 04.22.079	
Manager, Rules and Policies Assistance Unit	WSR_04.32.019 (M)	

Agency comments or recommendations, if a None.	any, as to statutory language, implementation, enforcement	ent, and fiscal matters:
Name of proponent: (person or organization	on) Department of Social and Health Services	Private Public Governmental
Name of agency personnel responsible f	or:	
Name	Office Location	Phone
Drafting Barbara Hanneman	P.O. Box 45600, Olympia, WA 98504-5600	(360) 725-2540
Implementation Barbara Hanneman	P.O. Box 45600, Olympia, WA 98504-5600	(360) 725-2540
Enforcement Barbara Hanneman	P.O. Box 45600, Olympia, WA 98504-5600	(360) 725-2540
Has a small business economic impact s	tatement been prepared under chapter 19.85 RCW?	
Yes. Attach copy of small business e	economic impact statement.	
A copy of the statement may be	obtained by contacting:	
Name:	3	
Address:		
phone ( )		
fax ( )		
e-mail	ranavad	
No. Explain why no statement was p	repared.	
The Department has analyzed these ru	les and determined that no new costs will be imposed or	n small businesses or
non-profits; or costs, if any, would be m	ninor.	
	DOW A LAST AND	
Is a cost-benefit analysis required under	RCW 34.05.328?	
Yes A preliminary cost-benefit analy	ysis may be obtained by contacting:	
Name: Tiffany Sevruk Address: Home and Communi	ty Services	
P.O. Box 45600		
Olympia, WA 98504	-5600	
phone (360) 725-2538		
fax (360) 407-7582		
e-mail <u>sevruta@dshs.wa.gov</u>		
☐ No: Please explain:		
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AMENDATORY SECTION (Amending WSR 06-16-072, filed 7/28/06, effective 8/28/06)

WAC 388-112-0250 What is CPR training? Cardiopulmonary resuscitation (CPR) training is training that requires successful completion of skills testing and is provided by an authorized CPR instructor.

#### NEW SECTION

WAC 388-112-02605 What is HIV/AIDS training? HIV/AIDS training is training that meets the Department of Health and Washington Industrial Safety and Health Act (WISHA) standards.

# NEW SECTION

WAC 388-112-02610 What content must be included in HIV/AIDS training? HIV/AIDS training must be taught in classroom style, using the Washington State Department of Health's "KNOW HIV Prevention Education for Health Care Facility Employees" manual, in a minimum of 2-3 hours, and by an expert instructor who can answer technical questions. Topics must include all of the following:

(1) Causes of HIV and how it is spread, including:

(a) Reported cases in the United States and Washington State;and

(b) Risk groups and risky behaviors.

(2) Transmission and infection control, including:

(a) Infection control precautions;

- (b) Factors affecting the risk for transmission; and
- (c) Risks for transmission to health care workers.
- (3) Legal and ethical issues, including:
- (a) Confidentiality;
- (b) Informed consent;
- (c) Legal reporting requirements;
- (d) Ethical issues; and
- (e) Civil rights.
- (4) Psychosocial issues, including:
- (a) Personal impact of HIV continuum;
- (b) The human response to death and dying;
- (c) Issues for care providers;
- (d) Family issues; and
- (e) Special populations.

## NEW SECTION

WAC 388-112-02615 Is competency testing required for HIV/AIDS training? No competency testing is required for HIV/AIDS training.

#### NEW SECTION

WAC 388-112-02620 Is there a challenge test for HIV/AIDS training? There is no challenge test for HIV/AIDS training.

### NEW SECTION

WAC 388-112-02625 What documentation is required for completion of HIV/AIDS training? HIV/AIDS training must be documented by a certificate of completion issued by the instructor or training entity to include:

(1) The name of the trainee;

(2) The name of the training curriculum;

(3) The name of the home or training entity giving the training;

(4) The instructor's name and signature;

(5) The date(s) of the training session; and

(6) The trainee must be given an original certificate. A home must keep a copy of the certificate on file.

#### NEW SECTION

WAC 388-112-02630 Who is required to complete HIV/AIDS training, and when?

Adult family homes:

(1) Licensed, certified or registered staff must meet the HIV/AIDS training requirements for their specific Department of Health license, certification or registration.

(2) All other adult family home staff who may have potential exposure to bodily fluids must meet the HIV/AIDS requirements

before having routine interaction with any resident.

Boarding homes:

(3) Licensed, certified, or registered staff must meet the HIV/AIDS training requirements for their specific Department of

Health license, certification, or registration.

(4) All other boarding home staff who may have potential exposure to bodily fluids must meet the HIV/AIDS requirements before having routine interaction with any resident.

AMENDATORY SECTION (Amending WSR 02-15-066, filed 7/11/02, effective 8/11/02)

WAC 388-112-0270 Who must take the forty-eight hour adult family home residential care administrator training and when? Providers licensed prior to December 31, 2006: Before operating more than one adult family home, the provider (including an entity representative as defined under chapter 388-76 WAC) successfully complete the department approved forty-eight hour residential care administrator training.

Prospective providers applying for a license after January 1, 2007: Before a license for an adult family home is granted, the prospective provider must successfully complete the department approved forty-eight hour residential care administrator training

for adult family homes.